

## Supplemental Application Data Sheet

### **Application Information**

Application number:: 10/591,884  
Filing Date::  
Application Type:: Regular  
Subject Matter:: Utility  
Suggested classification::  
Suggested Group Art Unit::  
CD-ROM or CD-R?::  
Number of CD disks::  
Number of copies of CDs::  
Sequence Submission::  
Computer Readable Form (CRF)?::  
Number of copies of CRF::  
Title:: FUSED RING AZADECALIN GLUCOCORTICOID  
RECEPTOR MODULATIONS  
Attorney Docket Number:: 019904-003310US  
Request for Early Publication:: No  
Request for Non-Publication:: No  
Suggested Drawing Figure::  
Total Drawing Sheets:: 0  
Small Entity?::  
Latin name::  
Variety denomination name::  
Petition included?:: No  
Petition Type::  
Licensed US Govt. Agency::  
Contract or Grant Numbers One::  
Secrecy Order in Parent Appl.?:: No

**Applicant Information**

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: US  
Status:: Full Capacity  
Given Name:: Robin  
Middle Name:: D.  
Family Name:: Clark  
City of Residence:: Kalaheo  
State or Province of Residence:: HI  
Country of Residence:: US  
Street of Mailing Address:: 4894M Kua Road  
City of Mailing Address:: Kalaheo  
State or Province of mailing address:: HI  
Country of mailing address:: US  
Postal or Zip Code of mailing address:: 96765

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: United Kingdom  
Status:: Full Capacity  
Given Name:: Nicholas  
Middle Name:: C.  
Family Name:: Ray  
City of Residence:: Harlow  
State or Province of Residence:: Essex  
Country of Residence:: United Kingdom  
Street of Mailing Address:: 8/9 Spire Green Centre, Flex Meadow  
City of Mailing Address:: Harlow  
State or Province of mailing address:: Essex  
Country of mailing address:: United Kingdom  
Postal or Zip Code of mailing address:: CM19 5TR

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: United Kingdom  
Status:: Full Capacity  
Given Name:: Paul  
Middle Name:: M.  
Family Name:: Blaney  
City of Residence:: Harlow  
State or Province of Residence:: Essex  
Country of Residence:: United Kingdom  
Street of Mailing Address:: 8/9 Spire Green Centre, Flex Meadow  
City of Mailing Address:: Harlow  
State or Province of mailing address:: Essex  
Country of mailing address:: United Kingdom  
Postal or Zip Code of mailing address:: CM19 5TR

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: United Kingdom  
Status:: Full Capacity  
Given Name:: Christopher  
Middle Name:: A.  
Family Name:: Hurley  
City of Residence:: Harlow  
State or Province of Residence:: Essex  
Country of Residence:: United Kingdom  
Street of Mailing Address:: 8/9 Spire Green Centre, Flex Meadow  
City of Mailing Address:: Harlow  
State or Province of mailing address:: Essex  
Country of mailing address:: United Kingdom  
Postal or Zip Code of mailing address:: CM19 5TR

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: United Kingdom  
Status:: Full Capacity  
Given Name:: Karen  
Family Name:: Williams  
City of Residence:: Harlow  
State or Province of Residence:: Essex  
Country of Residence:: United Kingdom  
Street of Mailing Address:: 8/9 Spire Green Centre, Flex Meadow  
City of Mailing Address:: Harlow  
State or Province of mailing address:: Essex  
Country of mailing address:: United Kingdom  
Postal or Zip Code of mailing address:: CM19 5TR

#### **Correspondence Information**

Correspondence Customer Number:: 20350

#### **Representative Information**

Representative Customer Number:: 20350

#### **Domestic Priority Information**

Application::	Continuity Type::	Parent Application::	Parent Filing Date::
This Application	National Stage of	PCT/US2005/008049	03/09/05
PCT/US2005/008049	An application claiming the benefit under 35 USC 119(e)	60/551,836	03/09/04

#### **Foreign Priority Information**

Country:: Application number:: Filing Date::

**Assignee Information**

Assignee Name:: Corcept Therapeutics, Inc.  
Street of mailing address:: 149 Commonwealth Drive  
City of mailing address:: Menlo Park  
State or Province of mailing address:: CA  
Country of mailing address:: US  
Postal or Zip Code of mailing address:: 94025